Image# 15950014817 PAGE 1 / 29

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED ADDRESS (number and street) Check if different than previously charloted (ACC) CHARLOTTE CHARLOTTE CHARLOTTE CHARLOTTE NC 28203-2861	
ADDRESS (number and street) Check if different than previously ATTENTION: MARY ANN ROUSE 1000 BLYTHE BOULEVARD CHARLOTTE NC 28203-2861	
ADDRESS (number and street) Check if different than previously ATTENTION: MARY ANN ROUSE 1000 BLYTHE BOULEVARD CHARLOTTE NC 28203-2861	PAC
ADDRESS (number and street) Check if different than previously ATTENTION: MARY ANN ROUSE 1000 BLYTHE BOULEVARD CHARLOTTE NC 28203-2861	
ADDRESS (number and street) Check if different than previously CHARLOTTE 1000 BLYTHE BOULEVARD NC 28203-2861	
Check if different than previously CHARLOTTE NC 28203-2861	
than previously CHARLOTTE NC 28203-2861	
reported. (ACC)	
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲	
C C00423871 3. IS THIS REPORT \times NEW (N) OR (A)	
(Choose One) Report	20 (M11) Election Only)
(a) Quarterly Reports: Due On: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec (Non-lyear of Year	20 (M12) Election Only)
April 15	31 (YE)
July 15	off (12R)
Quarterly Report (Q2) Report for the: Convention (12C) Special (12S)	
Quarterly Report (Q3) January 31 Flection on State of	
rear-End Report (YE)	
Report (Non-election	ial (30S)
Termination Report (TER) Election on Termination Report in the State of	
5. Covering Period 11 25 2014 through 12 31 2014	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.	
Type or Print Name of Treasurer Mary Ann Rouse	
Signature of Treasurer Mary Ann Rouse [Electronically Filed] Date Mary Ann Rouse [Electronically Filed]	15
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C.	§437g.
Office Use Only	X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC

25 2014 Report Covering the Period: 2014 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 274486.06 January 1, 2014 (b) Cash on Hand at 70760.04 Beginning of Reporting Period..... 94082.71 13534.66 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 84294.70 368568.77 6(a) and 6(c) for Column B)..... 0.00 284274.07 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 84294.70 84294.70 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC

R	eport Covering the Period: From:	M / D D / Y Y Y Y Y Y TO	: 12 31 2014
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	8464.27	74929.71
	(ii) Unitemized(iii) TOTAL (add	57.79	11333.15
	Lines 11(a)(i) and (ii)▶	8522.06	86262.86
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
12.	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	, 8522.06	86262.86
	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	137.72
17	to Federal Candidates and Other Political Committees Other Federal Receipts	5000.00	7500.00
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	12.60	182.13
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	13534.66	94082.71
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	13534.66	94082.71

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		200000000000000000000000000000000000000
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	7 7	
	Expenditures	0.00	24.07
	(c) Total Operating Expenditures	0.00	24.07
2	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	24.07
	Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees		
	and Other Political Committees	0.00	53000.00
4.	Independent Expenditures (use Schedule E)	0.00	0.00
25.	Coordinated Party Expenditures (2 U.S.C. §441a(d))	7	
	(use Schedule F)	0.00	0.00
		0.00	0.00
26.	Loan Repayments Made	0.00	0.00
27.	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	7 7 7	
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
29.	Other Disbursements	0.00	231250.00
0.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Emos σο(α)(i), σο(α)(ii) απα σο(υ))	7	7
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	284274.07
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	0.00	284274.07

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures					
3. Total Contributions (other than loans) (from Line 11(d), page 3)	8522.06	86262.86			
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00			
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8522.06	86262.86			
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	24.07			
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	137.72			
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	-113.65			

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		6	OF		29
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOS	SPITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Peter Acker		Date of Receipt
Mailing Address 4105 Crepe Ridge Drive		12 012014
City	State Zip Code	Transaction ID : SA11AI.12878
Denver	NC 28037	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	1
Carolinas HealthCare System	Administrator	
Receipt For: 2015 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Robert Battista		Date of Receipt
Mailing Address 1008 Sultana Lane		12 01 2014
City	State Zip Code	Transaction ID : SA11AI.12800
Matthews	NC 28104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.76
Name of Employer CarolinasHealthCareSystem	Occupation ADMIN	Payroll Deduction \$20.76 monthly
Receipt For: 2014 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Pamela M Beckwith	·	Date of Receipt
Mailing Address 1709 Rosebank Lane		12 01 2014 _
City Charlotte	State Zip Code NC 28226	Transaction ID : SA11AI.12815
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 166.63
Name of Employer	Occupation	Payroll Deduction \$166.63 monthly
CarolinasHealthCareSystem	ADMIN]
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional)		537.39
	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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	13 14						16	6		17

or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOS	PITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Benjamin Rix Brooks Mailing Address 2024 New Hope Road		Date of Receipt
City	State Zip Code	12 01 2014 Transaction ID : SA11AI.12821
Charlotte FEC ID number of contributing federal political committee.	NC 28203-6064	Amount of Each Receipt this Period 41.63
Name of Employer CarolinasHealthCareSystem Receipt For: 2014	Occupation PHYS Aggregate Year to Date	Payroll Deduction \$41.63 monthly
Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jerry L Bryson Mailing Address 148 Cabell Way		Date of Receipt
City Charlotte	State Zip Code NC 28211	12 01 2014 Transaction ID : SA11AI.12812 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	25.00 Payroll Deduction \$25 monthly
Carolinas HealthCare System Receipt For: 2014 Primary General Other (specify) ▼	ADMIN Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Stephen C Burr		Date of Receipt
Mailing Address 203 Eslynn Road City	State Zip Code	12 01 2014 Transcript ID - CAMAN 12022
Mount Holly	NC 28120	Transaction ID : SA11AI.12823 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	62.50
Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary	Occupation ADMIN Aggregate Year-to-Date ▼ 750.00	Payroll Deduction \$62.5 monthly
SUBTOTAL of Receipts This Page (optional).	<u> </u>	129.13
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSI	PITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Nancy C. Butler		Date of Receipt
Mailing Address 3821 Kitley Place		12 01 2014
City Charlotte	State Zip Code NC 28210	Transaction ID : SA11AI.12836 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.63
Name of Employer CarolinasHealthCareSystem	Occupation ADMIN	Payroll Deduction \$41.63 monthly
Receipt For: 2014 Primary	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Vincent P Casingal Mailing Address 7112 Graybeard Court		Date of Receipt 12 01 2014
City Charlotte	State Zip Code NC 28226	Transaction ID : SA11AI.12856 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer CarolinasHealthCareSystem	Occupation PHYS	Payroll Deduction \$25 monthly
Receipt For: 2014 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Jack F Chamblee		Date of Receipt
Mailing Address 798 Hidden Forest Lane		12 01 2014
City Hayesville	State Zip Code NC 28904	Transaction ID : SA11AI.12858 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.63
Name of Employer Carolinas HealthCare System Receipt For: 2014	Occupation ADMIN Aggregate Year-to-Date ▼	Payroll Deduction \$41.63 monthly
Primary	500.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	108.26
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the **Detailed Summary Page**

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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC Full Name (Last, First, Middle Initial) Mr. Paul G Colavita Date of Receipt Mailing Address 2401 Inverness Road 01 2014 12 City Zip Code State Transaction ID: SA11AI.12829 NC Charlotte 28209 Amount of Each Receipt this Period FEC ID number of contributing C 41.63 federal political committee. Payroll Deduction \$41.63 monthly Name of Employer Occupation **ADMIN** Carolinas HealthCare System Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rose Lyerly Cook Date of Receipt Mailing Address 1329 Wyanoke Avenue 12 01 2014 City State Zip Code Transaction ID: SA11AI.12810 NC Shelby 28152 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Payroll Deduction \$25 monthly Name of Employer Occupation CarolinasHealthCareSystem ADMIN Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 550.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Kathryn Jeanne Dever Date of Receipt Mailing Address 3277 Richard's Crossing M M / 12 01 2014 City Zip Code State Transaction ID: SA11AI.12833 SC Fort Mill 29708 Amount of Each Receipt this Period FEC ID number of contributing 20.76 С federal political committee. Payroll Deduction \$20.76 monthly Name of Employer Occupation **ADMIN** CarolinasHealthCareSystem Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General Other (specify) 250.00 87.39 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC Full Name (Last, First, Middle Initial) Mr. David M Ellerbe Date of Receipt Mailing Address 2030 Peppercorn Ln 01 2014 12 City Zip Code State Transaction ID: SA11AI.12824 NC Charlotte 28205 Amount of Each Receipt this Period FEC ID number of contributing C 20.76 federal political committee. Payroll Deduction \$20.76 monthly Name of Employer Occupation **ADMIN** CarolinasHealthCareSystem Receipt For: 2014 Aggregate Year-to-Date ▼ Primary **X** General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael P Fabrizius Date of Receipt Mailing Address 18754 Greyton Lane 12 01 2014 City State Zip Code Transaction ID: SA11AI.12818 Davidson NC 28036 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Payroll Deduction \$25 monthly Name of Employer Occupation CarolinasHealthCareSystem ADMIN Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jesse Faile Date of Receipt Mailing Address 2014 Fairview Circle M M / 80 12 2014 City Zip Code State Transaction ID: SA11AI.12873 NC Wilkesboro 28697 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation President/WRMC Carolinas Healthcare System Receipt For: 2015 Aggregate Year-to-Date ▼ Primary X General Other (specify) 250.00

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295.76

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or for commercial purposes, other than using the	ne name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSE	PITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) A. Michelle Fortune		Date of Receipt
Mailing Address 105 Willow-Ridge Drive		12 01 2014
City	State Zip Code	Transaction ID : SA11AI.12804
Morganton	NC 28655	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.63
Name of Employer	Occupation	Payroll Deduction \$41.63 monthly
CarolinasHealthCareSystem	ADMIN	
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary	500.00	
Full Name (Last, First, Middle Initial) 3. Mr. Paul S Franz		Date of Receipt
Mailing Address 1320 Fillmore Avenue #505		M M / D D / Y Y Y Y
		12 01 2014
City	State Zip Code	Transaction ID : SA11AI.12809
Charlotte	NC 28203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.63
Name of Employer	Occupation	Payroll Deduction \$416.63 monthly
CarolinasHealthCareSystem	ADMIN	
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary General	5000.00	
Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial) Dr. Ted Garcia		Date of Receipt
Mailing Address 989 Wessington Manor Lane		12 01 2014
City	State Zip Code	Transaction ID : SA11AI.12866
Fort Mill	SC 29715	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.76
Name of Employer	Occupation	Payroll Deduction \$20.76 monthly
CarolinasHealthCareSystem	PHYS	
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		479.02
TOTAL This Period (last page this line number	r only)	

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NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC Full Name (Last, First, Middle Initial) Mr. Greg A Gombar Date of Receipt Mailing Address 4625 Cotton Creek Drive 01 2014 12 City Zip Code State Transaction ID: SA11AI.12842 NC Charlotte 28226 Amount of Each Receipt this Period FEC ID number of contributing C 416.63 federal political committee. Payroll Deduction \$416.63 monthly Name of Employer Occupation **ADMIN** Carolinas HealthCare System Receipt For: 2014 Aggregate Year-to-Date ▼ Primary **X** General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Clark E Goodwin Date of Receipt Mailing Address 6028 Alexa Road 12 01 2014 City State Zip Code Transaction ID: SA11AI.12849 NC Charlotte 28277 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Payroll Deduction \$25 monthly Name of Employer Occupation CarolinasHealthCareSystem ADMIN Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kathleen Grew Date of Receipt Mailing Address 8603 Excalibur Way M M / 12 01 2014 City Zip Code State Transaction ID: SA11AI.12860 NC Huntersville 28078 Amount of Each Receipt this Period FEC ID number of contributing 20.76 С federal political committee. Payroll Deduction \$20.76 monthly Name of Employer Occupation VΡ Carolinas HealthCare System Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General Other (specify) 250.00 462.39 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the **Detailed Summary Page**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC Full Name (Last, First, Middle Initial) A. Dr. Mary N Hall Date of Receipt Mailing Address 1040 Queens Road 01 2014 12 City Zip Code State Transaction ID: SA11AI.12803 NC Charlotte 28207 Amount of Each Receipt this Period FEC ID number of contributing C 83.26 federal political committee. Payroll Deduction \$83.26 monthly Name of Employer Occupation **ADMIN** CarolinasHealthCareSystem Receipt For: 2014 Aggregate Year-to-Date ▼ Primary **X** General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sara J Herron Date of Receipt Mailing Address 9422 Briarwick Lane 12 01 2014 City State Zip Code Transaction ID: SA11AI.12862 NC Charlotte 28277-1673 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Payroll Deduction \$125 monthly Name of Employer Occupation Carolinas HealthCare System ADMIN Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Robert V Higgins Date of Receipt Mailing Address 7112 Fairway Vista Drive M M / 12 01 2014 City Zip Code State Transaction ID: SA11AI.12855 NC Charlotte 28226 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Payroll Deduction \$20 monthly Name of Employer Occupation PHYS CarolinasHealthCareSystem Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General Other (specify) 240.00 228.26 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commerci	al purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\	OMMITTEE (In Full) TE-MECKLENBURG HOSPI	TAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Laurence	ast, First, Middle Initial) C Hinsdale ess 7117 Stirewalt Road		Date of Receipt
City Concord FEC ID num	ber of contributing	State Zip Code NC 28027	12 01 2014 Transaction ID : SA11AI.12857 Amount of Each Receipt this Period 250.00
Name of Em Carolinas He Receipt For:	althCare System 2014	Occupation ADMIN Aggregate Year-to-Date ▼ 3000.00	Payroll Deduction \$250 monthly
Mr. Christ Mailing Addre City Charlotte FEC ID num federal politic Name of Em CarolinasHea Receipt For: Primary	lthCareSystem 2014	State Zip Code NC 28209 C Occupation ADMIN Aggregate Year-to-Date ▼	Date of Receipt 12 01 2014 Transaction ID: SA11AI.12825 Amount of Each Receipt this Period 125.00 Payroll Deduction \$125 monthly
City Charlotte FEC ID num federal politic Name of Em CarolinasHea Receipt For: Primary	ber of contributing cal committee. ployer althCareSystem	State Zip Code NC 28211 C Occupation ADMIN Aggregate Year-to-Date ▼	Date of Receipt 12 01 2014 Transaction ID: SA11AI.12830 Amount of Each Receipt this Period 166.63 Payroll Deduction \$166.63 monthly
SUBTOTAL of	Receipts This Page (optional)	>	541.63
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	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSE	PITAL AUTHORITY/CAROLINAS HEALTHO	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Mr. W. Christopher Johnson		Date of Receipt
Mailing Address 445 Forest Hill Circle		12 01 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.12841
Rutherfordton	NC 28139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.63
Name of Employer	Occupation	Payroll Deduction \$41.63 monthly
CarolinasHealthCareSystem	ADMIN	
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Scott Robertson Jones		Date of Receipt
Mailing Address 9707 Welwyn Lane		12 01 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.12865
Charlotte	NC 28210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.76
Name of Employer	Occupation	Payroll Deduction \$20.76 monthly
CarolinasHealthCareSystem	ADMIN	
Receipt For: 2014 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Stephen Dennis Jones		Date of Receipt
Mailing Address 125 Lake Mist Drive		12 01 2014
City	State Zip Code	Transaction ID : SA11AI.12807
Belmont	NC 28012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.76
Name of Employer	Occupation	Payroll Deduction \$20.76 monthly
Carolinas HealthCare System	ADMIN	
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary X General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	•	83.15
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Ms. Kathleen Ann Kaney Mailing Address 2316 Vail Avenue City Charlotte State Charlotte NC Carolinas HealthCare System Receipt For: 2014 Primary Other (specify) Mailing Address 2316 Vail Avenue State Zip Code Transaction ID: SA11AI.1282 Amount of Each Receipt this Performance C Payroll Deduction \$10.38 monthly Aggregate Year-to-Date ▼ 625.00	214 28 eriod 10.38
City State Zip Code Charlotte NC 28207 FEC ID number of contributing federal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary ☐ General Other (specify) ▼ Payroll Deduction \$10.38 monthly Aggregate Year-to-Date ▼ 12 01 20 Transaction ID : SA11AI.1282 Amount of Each Receipt this Performance in the properties of the prop	28 eriod 10.38
Charlotte NC 28207 Amount of Each Receipt this Perfederal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary Other (specify) ▼ Amount of Each Receipt this Perfederal Coccupation Administrator Administrator Aggregate Year-to-Date ▼ 625.00	eriod 10.38
FEC ID number of contributing federal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary Other (specify) ▼ Amount of Each Receipt this Petal Receipt this P	10.38
Receipt For: 2014 Primary Other (specify) ▼ Occupation Administrator Aggregate Year-to-Date ▼ Payroll Deduction \$10.38 monthly Aggregate Year-to-Date ▼	
Carolinas HealthCare System Receipt For: 2014 Primary Other (specify) ▼ Administrator Aggregate Year-to-Date ▼ 625.00	′
Receipt For: 2014 Primary General Other (specify) Aggregate Year-to-Date ▼ 625.00	
Receipt For: 2014 Primary	
Primary X General Other (specify) ▼ 625.00	
Full Name (Last, First, Middle Initial) Mr. Robert M Keener Date of Receipt	
	14
City State Zip Code Transaction ID : SA11AI.1285	0
Stanley NC 28164 Amount of Each Receipt this Pe	eriod
FEC ID number of contributing federal political committee.	25.00
Name of Employer Occupation Payroll Deduction \$25 monthly Carolinas HealthCare System ADMIN	
Receipt For: 2014 Aggregate Year-to-Date ▼	
Primary General	
Other (specify) ▼ 300.00	
Full Name (Last, First, Middle Initial) . Mr. John J Knox Date of Receipt	
Mailing Address 6530 Boykin Spaniel Road 12 01 20	14
City State Zip Code Transaction ID : SA11AI.1285	1
Charlotte NC 28277 Amount of Each Receipt this Pe	eriod
FEC ID number of contributing federal political committee.	41.63
Name of Employer Occupation Payroll Deduction \$41.63 monthly	1
CarolinasHealthCareSystem ADMIN	
Receipt For: 2014 Aggregate Year-to-Date ▼	
Primary General	
Other (specify) ▼ 500.00	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC Full Name (Last, First, Middle Initial) Thomas F Laymon Date of Receipt Mailing Address 2004 Garden View Lane 01 2014 12 City Zip Code State Transaction ID: SA11AI.12820 NC Weddington 28104 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Payroll Deduction \$100 monthly Name of Employer Occupation **ADMIN** Carolinas HealthCare System Receipt For: 2014 Aggregate Year-to-Date ▼ Primary **X** General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Frank S Letherby Date of Receipt Mailing Address 9438 White Hemlock Lane 12 01 2014 City State Zip Code Transaction ID: SA11AI.12863 Charlotte NC 28270 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Payroll Deduction \$60 monthly Name of Employer Occupation Carolinas HealthCare System ADMIN Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 720.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. W. Spencer Lilly Date of Receipt Mailing Address 9306 Copans Glen Lane M = M 12 01 2014 City Zip Code State Transaction ID: SA11AI.12861 NC Huntersville 28078 Amount of Each Receipt this Period FEC ID number of contributing 166.63 С federal political committee. Payroll Deduction \$166.63 monthly Name of Employer Occupation **ADMIN** Carolinas HealthCare System Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General Other (specify) 2000.00 326.63 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOS	PITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Toni G Lovingood Mailing Address 406 Long Branch Road		Date of Receipt
City Marble	State Zip Code NC 28905	12 01 2014 Transaction ID : SA11AI.12838 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.76
Name of Employer CarolinasHealthCareSystem Receipt For: 2014	Occupation ADMIN	Payroll Deduction \$20.76 monthly
Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Frieda M Lowder Mailing Address PO Box 5685		Date of Receipt
City Concord	State Zip Code NC 28027	12 01 2014 Transaction ID : SA11AI.12868 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.26 Payroll Deduction \$83.26 monthly
Name of Employer CarolinasHealthCareSystem Receipt For: 2014	Occupation ADMIN Aggregate Year-to-Date ▼	, , , , , , , , , , , , , , , , , , , ,
Primary	1000.00	
Full Name (Last, First, Middle Initial) Michael J Lutes		Date of Receipt
Mailing Address 4025 Camrose Crossing	7. O. I.	12 01 2014
City Matthews	State Zip Code NC 28104	Transaction ID : SA11AI.12837 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.26 Payroll Deduction \$83.26 monthly
Name of Employer CarolinasHealthCareSystem Receipt For: 2014	Occupation ADMIN	1 Ayron Deduction 603.20 Monthly
Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	>	187.28
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NAME OF COMMITTEE (In Full)

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CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC

Full Name (Last, First, Middle Initial) Steven Boyd Martin Date of Receipt Mailing Address 1904 DeArmon Drive 01 2014 12 City State Zip Code Transaction ID: SA11AI.12819 NC Charlotte 28205 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Payroll Deduction \$25 monthly Name of Employer Occupation **ADMIN** CarolinasHealthCareSystem Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Darlyne Menscer Date of Receipt Mailing Address 6909 Brandenburg Court 12 01 2014 City State Zip Code Transaction ID: SA11AI.12880 Charlotte NC 28210 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Carolinas HealthCare System Physician Receipt For: 2015 Aggregate Year-to-Date ▼ Primary ✓ General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. John G Moore Date of Receipt Mailing Address 3530 Providence Plantation Lane M M / 12 01 2014 City State Zip Code Transaction ID: SA11AI.12834 NC Charlotte 28270 Amount of Each Receipt this Period FEC ID number of contributing 20.76 С federal political committee.

SUBTOTAL of Receipts This Page (optional)		Ī	7	Ξ		7		104	5.76	
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250.00

Occupation ADMIN

Aggregate Year-to-Date ▼

Payroll Deduction \$20.76 monthly

Name of Employer

Receipt For: 2014

Primary

Carolinas HealthCare System

Other (specify)

X General

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CHARLOTTE-MECKLENBURG HOS	PITAL AUTHORITY/CAROLINAS HEALTHO	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Michael Mullowney Mailing Address 709 Galway Court		Date of Receipt 12 01 2014
City Matthews	State Zip Code NC 28104	Transaction ID : SA11AI.12854 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 250.00	20.76 Payroll Deduction \$20.76 monthly
Full Name (Last, First, Middle Initial) Tye Jeffrey Nordberg Mailing Address 219 Dellwood Avenue City	State Zip Code	Date of Receipt 12 15 2014 Transaction ID : SA11AI.12875
Charlotte FEC ID number of contributing federal political committee. Name of Employer	NC 28209 C Occupation	Amount of Each Receipt this Period 250.00
Carolinas HealthCare System Receipt For: 2015 Primary General Other (specify) ▼	Administrator Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James C Olsen Mailing Address 5900 Summerston Place City	State Zip Code	Date of Receipt 12 01 2014 Transaction ID: SA11AI.12847
Charlotte FEC ID number of contributing federal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary ☐ General Other (specify) ▼	NC 28277 C Occupation ADMIN Aggregate Year-to-Date ▼ 2500.00	Amount of Each Receipt this Period 208.26 Payroll Deduction \$208.26 monthly
	>	479.02
TOTAL This Period (last page this line number	r only)	

NAME OF COMMITTEE (In Full)

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CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC

Full Name (Last, First, Middle Initial) Jerry A Parrish Date of Receipt Mailing Address 107 Nottingham Court 2014 City State Zip Code Transaction ID: SA11AI.12872 SC Anderson 29621 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Administrator Carolinas HealthCare System Receipt For: 2015 Aggregate Year-to-Date ▼ Primary ✓ General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joseph G Piemont Date of Receipt Mailing Address 2028 Hopedale Avenue 12 01 2014 City State Zip Code Transaction ID: SA11AI.12822 Charlotte NC 28207 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Payroll Deduction \$400 monthly Name of Employer Occupation Carolinas HealthCare System ADMIN Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 4800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Debra Plousha Moore Date of Receipt Mailing Address 6935 Conservatory Lane M M / 12 01 2014 City Zip Code State Transaction ID: SA11AI.12852 NC Charlotte 28210 Amount of Each Receipt this Period

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2000.00

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Occupation ADMIN

Aggregate Year-to-Date ▼

166.63

Payroll Deduction \$166.63 monthly

FEC ID number of contributing

Carolinas HealthCare System

Other (specify)

X General

federal political committee.

Name of Employer

Receipt For: 2014

Primary

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	MMITTEE (In Full) E-MECKLENBURG HOSP	ITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Mailing Address City	st, First, Middle Initial) aischel 5 5057 Crofton Drive	State Zip Code	Date of Receipt 12 01 2014 Transaction ID: SA11AI.12844
Fort Mill FEC ID number federal political Name of Emplor CarolinasHealth Receipt For: 2 Primary Other (sp	committee. Oyer CareSystem O14 General ecify)	SC 29715 C Occupation ADMIN Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 20.76 Payroll Deduction \$20.76 monthly
B. Mr. James	r of contributing committee. Dyer CareSystem O14 General	State Zip Code NC 28012 C Occupation ADMIN Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 01 2014 Transaction ID : SA11AI.12859 Amount of Each Receipt this Period 20.76 Payroll Deduction \$20.76 monthly
C. Mr. Roger Mailing Address City Charlotte	r of contributing committee.	State Zip Code NC 28277 C Occupation ADMIN Aggregate Year-to-Date ▼ 3000.00	Date of Receipt 12 01 2014 Transaction ID: SA11AI.12805 Amount of Each Receipt this Period 250.00 Payroll Deduction \$250 monthly

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NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY/CAROLINAS HEALTHCARE SYSTEM EMPLOYEES FED PAC Full Name (Last, First, Middle Initial) Mr. Craig D. Richardville Date of Receipt Mailing Address 17235 Glassfield Drive 01 2014 12 City Zip Code State Transaction ID: SA11AI.12817 NC Huntersville 28078 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Payroll Deduction \$25 monthly Name of Employer Occupation **ADMIN** Carolinas HealthCare System Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Douglas C Roush Date of Receipt Mailing Address 2710 Normandy Road 12 01 2014 City State Zip Code Transaction ID: SA11AI.12831 NC Charlotte 28209 Amount of Each Receipt this Period FEC ID number of contributing 20.76 federal political committee. Payroll Deduction \$20.76 monthly Name of Employer Occupation CarolinasHealthCareSystem ADMIN Receipt For: 2014 Aggregate Year-to-Date ▼ Primary ✓ General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nykola Samilo Date of Receipt Mailing Address 408 Imperial Way M M / 12 01 2014 City Zip Code State Transaction ID: SA11AI.12839 NC Albemarle 28001 Amount of Each Receipt this Period FEC ID number of contributing 20.76 С federal political committee. Payroll Deduction \$20.76 monthly Name of Employer Occupation **ADMIN** CarolinasHealthCareSystem Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General Other (specify) 250.00 66.52 SUBTOTAL of Receipts This Page (optional).....

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or for commercial purposes, other than usi	ng the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG H	OSPITAL AUTHORITY/CAROLINAS HEALTH	HCARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) A. John Michael Santopietro		Date of Receipt
Mailing Address 320 Charndon Village C		12 01 2014 .
City Charlotte	State Zip Code NC 28211	Transaction ID : SA11AI.12832
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 41.63
Name of Employer CarolinasHealthCareSystem	Occupation ADMIN	Payroll Deduction \$41.63 monthly
Receipt For: 2014 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) B. Carnetha M Simmons		Date of Receipt
Mailing Address 2225 Hawkins Street #2	35	12 01 2014
City Charlotte	State Zip Code NC 28203	Transaction ID : SA11AI.12826 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer CarolinasHealthCareSystem	Occupation PHYS	Payroll Deduction \$25 monthly
Receipt For: 2014 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Mr. Ronald M Smidt		Date of Receipt
Mailing Address P O Box 901		12 01 _ 2014 _
City Troutman	State Zip Code NC 28166	Transaction ID : SA11AI.12867 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Carolinas HealthCare System	Occupation ADMIN	Payroll Deduction \$30 monthly
Receipt For: 2014 Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (option	nal)	96.63
TOTAL This Period (last page this line nu	mber only)	

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOS	SPITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) James Michael Stevenson Mailing Address 1711 Mission Road		Date of Receipt
City Murphy FEC ID number of contributing federal political committee. Name of Employer	State Zip Code NC 28906 C Occupation	Transaction ID : SA11AI.12816 Amount of Each Receipt this Period 83.26 Payroll Deduction \$83.26 monthly
CarolinasHealthCareSystem Receipt For: 2014 Primary General Other (specify) ▼	ADMIN Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Michael C Tarwater Mailing Address 1414 Biltmore Drive City	State Zip Code	Date of Receipt 12 01 2014 Transaction ID : SA11AI.12811
Charlotte FEC ID number of contributing federal political committee. Name of Employer	NC 28207 C Occupation	Amount of Each Receipt this Period 416.63 Payroll Deduction \$416.63 monthly
CarolinasHealthCareSystem Receipt For: 2014 Primary General Other (specify) ▼	ADMIN Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Alfred P Taylor Mailing Address 125 Lakeland Circle City	State Zip Code	Date of Receipt 12 01 2014 Transaction ID : SA11AI.12808
Mt. Gilead FEC ID number of contributing federal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary General Other (specify)	NC 27306 C Occupation ADMIN Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 25.00 Payroll Deduction \$25 monthly
SUBTOTAL of Receipts This Page (optional)	>	524.89
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSI	PITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Dr. Chris M Teigland Mailing Address 700 Hungerford Place		Date of Receipt
City Charlotte FEC ID number of contributing federal political committee.	State Zip Code NC 28207	12 01 2014 Transaction ID : SA11AI.12853 Amount of Each Receipt this Period 200.00 Payroll Deduction \$200 monthly
Name of Employer CarolinasHealthCareSystem Receipt For: 2014 Primary General Other (specify) ▼	Occupation PHYS Aggregate Year-to-Date ▼ 2400.00	T ayron Deduction \$200 monthly
Full Name (Last, First, Middle Initial) Mr. David Thomas Mailing Address 1609 Penderlea Lane City Matthews FEC ID number of contributing federal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary General	State Zip Code NC 28105 C Occupation ADMIN Aggregate Year-to-Date ▼	Date of Receipt 12 01 2014 Transaction ID : SA11AI.12814 Amount of Each Receipt this Period 25.00 Payroll Deduction \$25 monthly
Other (specify) ▼ Full Name (Last, First, Middle Initial) Joan Thomas Mailing Address 230 Summermore Drive City	State Zip Code	Date of Receipt 12 01 2014 Transaction ID : SA11AI.12827
Charlotte FEC ID number of contributing federal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary General Other (specify) ▼	NC 28270 C Occupation Administrator Aggregate Year-to-Date ▼ 1500.00	Amount of Each Receipt this Period 125.00 Payroll Deduction \$125 monthly
SUBTOTAL of Receipts This Page (optional)		350.00
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NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSP	ITAL AUTHORITY/CAROLINAS HEALTHO	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Charles Tomlinson		Date of Receipt
Mailing Address 328 Cross Creek Dr.		12 08 2014
City	State Zip Code	Transaction ID : SA11AI.12877
Cherryville	NC 28021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	†
Carolinas HealthCare System	Administrator	
Receipt For: 2015	Aggregate Year-to-Date ▼	
Primary	250.00	
Full Name (Last, First, Middle Initial) 3. Ms. Martha J Whitecotton		Date of Receipt
Mailing Address 9526 Greyson Ridge Drive		12 01 2014
City	State Zip Code	Transaction ID : SA11AI.12864
Charlotte	NC 28277	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	Payroll Deduction \$125 monthly
Carolinas HealthCare System	ADMIN	
Receipt For: 2014 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) C. Mary Ann Wilcox		Date of Receipt
Mailing Address 5314 Wingedfoot Road		12 01 2014
City	State Zip Code	Transaction ID : SA11AI.12845
Charlotte	NC 28226	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	Payroll Deduction \$125 monthly
CarolinasHealthCareSystem	ADMIN	
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary General	. 199. 29ato Toul to Date ▼	
Other (specify) ▼	1500.00	
SUBTOTAL of Receipts This Page (optional)		500.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)									
X	11a		11b		11c		12		
	13		14		15		16		17

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOS	SPITAL AUTHORITY/CAROLINAS HEALTH	CARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) Ms. Phyllis Anne Wingate Mailing Address 6005 Willowood Road City Kannapolis FEC ID number of contributing federal political committee. Name of Employer CarolinasHealthCareSystem Receipt For: 2014 Primary Other (specify) General	State Zip Code NC 28081 C Occupation ADMIN Aggregate Year-to-Date ▼ 2750.00	Date of Receipt 12 01 2014 Transaction ID : SA11AI.12848 Amount of Each Receipt this Period 250.00 Payroll Deduction \$250 monthly
Full Name (Last, First, Middle Initial) Zachary Zapack Mailing Address 1015 Charlotte Ave #351 City Rock Hill FEC ID number of contributing federal political committee. Name of Employer Carolinas HealthCare System Receipt For: 2014 Primary General Other (specify) Other (specify)	State Zip Code SC 29732 C Occupation Administrator Aggregate Year-to-Date ▼ 3000.00	Date of Receipt 12 01 2014 Transaction ID: SA11AI.12801 Amount of Each Receipt this Period 250.00 Payroll Deduction \$250 monthly
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		500.00 8464.27
TOTAL THIS Period (last page this line numb	per only)	9

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 29 OF 29 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12
	Detailed Sulfilliary Fage	13 14 15 X 16 17
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) CHARLOTTE-MECKLENBURG HOSPITAL	AUTHORITY/CAROLINAS HEALT	THCARE SYSTEM EMPLOYEES FED PAC
Full Name (Last, First, Middle Initial) 1. Pittenger for Congress		Date of Receipt
Mailing Address PO Box 11207		12 03 2014
•	state Zip Code NC 28220	Transaction ID : SA16.12883 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C00514513	5000.00
Name of Employer Oc	cupation	Campaign Contribution Refund
Receipt For: 2014 Ag	gregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial) 3.		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	state Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer Oct	cupation	
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	state Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer Oc	cupation	
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		5000.00

TOTAL This Period (last page this line number only).....

5000.00